

# WISCONSIN DEPARTMENT OF REGULATION & LICENSING



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# Wisconsin Department of Regulation & Licensing

Mail To: P.O. Box 8935  
Madison, WI 53708-8935

FAX #: (608) 266-2264  
Phone #: (608) 266-2112

1400 E. Washington Avenue  
Madison, WI 53703

E-Mail: web@drl.state.wi.us  
Website: http://drl.wi.gov

07BAC080

## BARBERING AND COSMETOLOGY EXAMINING BOARD

### CITATION FOR ADMINISTRATIVE FORFEITURE

<input checked="" type="checkbox"/> CITATION DOE CASE FILE # <u>07BAC080</u>	<input checked="" type="checkbox"/> FINAL DECISION AND ORDER LS # <u>07091027BAC</u>
<u>Mark Peterson (owner/manager Marks Barber Styling)</u>	
<input checked="" type="checkbox"/> Individual Credential Holder Name License # <u>22903-81</u>	<input type="checkbox"/> Establishment Name License # _____

787 N. Main Street Oregon WI 53575  
Street City Zip  
Tuesday 5/8/07 9:45 a.m.  
Day of Week Date Time

On the above stated time, date and location, an investigation/inspection has disclosed the following violation.

① Failure to maintain Salon in a Sanitary Condition:  
dirty Clipper Blades, hair in drawers, on floors, on counters

In violation of Section BAC 4.01 (1) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code  
Michelle Kishes Investigator 5/8/07  
Signature of Investigative Staff Title Date  
Mark R. Peterson ☒ Licensee OR ☐ Establishment Owner 5/8/07  
Signature of Date

Pursuant to Wis. Stat. § 454.15(3), the licensing authority is authorized to impose a forfeiture in lieu of or in addition to other disciplinary action against your license.

PLEASE TAKE NOTICE THAT THE CREDENTIAL HOLDER MAY DEPOSIT A FORFEITURE AND COSTS IN THE AMOUNT OF \$ 130- BY MAILING A CHECK OR MONEY ORDER NO LATER THAN TWENTY (20) DAYS FROM THE DATE OF THIS CITATION, TOGETHER WITH THE SIGNED COPY OF THIS FORM TO: DEPARTMENT OF REGULATION AND LICENSING, DIVISION OF ENFORCEMENT, 1400 EAST WASHINGTON AVENUE, P.O. BOX 8935, MADISON, WI 53708. PAYMENT SHALL BE TREATED AS A PLEA OF NO CONTEST TO THE VIOLATION CITED ABOVE AND CONSENT TO AN ORDER OF FORFEITURE PLUS COSTS, NOT TO EXCEED THE AMOUNT OF THE DEPOSIT.

Please reference "NOTICE OF RIGHT TO CONTEST" on backside of pink copy.

Jeanie M Bush  
9-10-07

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Website: http://drl.wi.gov

## BARBERING AND COSMETOLOGY EXAMINING BOARD

### CITATION FOR ADMINISTRATIVE FORFEITURE

<input checked="" type="checkbox"/> CITATION DOE CASE FILE # <u>076AC080</u>	<input type="checkbox"/> FINAL DECISION AND ORDER LS # _____
<input checked="" type="checkbox"/> Individual Credential Holder Name License # <u>22903-81</u>	<input type="checkbox"/> Establishment Name License # _____

Mark Peterson (owner/manager marks Barber Styling)

787 N. Main Street Oregon WI 53575  
Street City Zip  
Tuesday 5/8/07 9:45 a.m.  
Day of Week Date Time

On the above stated time, date and location, an investigation/inspection has disclosed the following violation.

① - Dirty Barbicide; Failure to change Barbicide daily

In violation of Section BAC 4.02(5) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code  
Mechelle Kisher Investigator 9:45 a.m.  
Signature of Investigative Staff Title Date  
Mark R. Peterson 5/8/07 9:45 a.m.  
Signature of ☒ Licensee OR ☐ Establishment Owner Date

Pursuant to Wis. Stat. § 454.15(3), the licensing authority is authorized to impose a forfeiture in lieu of or in addition to other disciplinary action against your license.

PLEASE TAKE NOTICE THAT THE CREDENTIAL HOLDER MAY DEPOSIT A FORFEITURE AND COSTS IN THE AMOUNT OF \$ 130 - BY MAILING A CHECK OR MONEY ORDER NO LATER THAN TWENTY (20) DAYS FROM THE DATE OF THIS CITATION, TOGETHER WITH THE SIGNED COPY OF THIS FORM TO: DEPARTMENT OF REGULATION AND LICENSING, DIVISION OF ENFORCEMENT, 1400 EAST WASHINGTON AVENUE, P.O. BOX 8935, MADISON, WI 53708. PAYMENT SHALL BE TREATED AS A PLEA OF NO CONTEST TO THE VIOLATION CITED ABOVE AND CONSENT TO AN ORDER OF FORFEITURE PLUS COSTS, NOT TO EXCEED THE AMOUNT OF THE DEPOSIT.

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